

AMENDMENT
(CHANGE OF PRIMARY PROVIDER)
FOR
FAMILY CHILD CARE HOME II

- ❖ **Family Child Care Home II Application:** The application needs to be current, accurate, complete and signed by the Licensee. List all staff including volunteers and substitutes. **If this Family Child Care Home II is in your place of residence, must list all persons residing in the home (including yourself) in the lower section of the application. Foster children and persons who are regularly present in the home, are considered household members and must be listed on the application.**
- ❖ **Contact numbers:** You will need to send contact phone numbers for the Licensee and primary provider. Please list those on a separate sheet of paper.
- ❖ **Health Information Report:** The Primary Provider completes Part A of the Health Information Report. A Medical Practitioner completes Part B. The Health Information Report shall be completed annually.
- ❖ **Felony Misdemeanor Statements:** Instructions are on the form. Primary Provider shall complete the form. Please ensure the form is completed accurately and signed/dated.
- ❖ **Consent and Authorization for Release of Information form for Family Child Care Homes:** Instructions are on the form. New primary provider must accurately complete, sign and date the form.
- ❖ **Current First Aid Training Certificate/Card:** Send a copy of your current certificate or if you have a card, send a copy of the front and back of it.
- ❖ **Current CPR Training Certificate/Card:** Send a copy of your certificate or if you have a card, send a copy of the front and back of it.
- ❖ **Family Child Care Home Orientation Certificate:** The Primary Provider will need to attend Orientation Training. This is a one hour training designed to help you comply with the Family Child Care Home II Regulations. Upon completion of the training, you will be given a certificate. Send in a copy of the certificate.

SEND ALL THE ABOVE ITEMS TO:

Douglas or Sarpy County
Department of Health and Human Services
Division of Public Health
Children's Services Licensing
1801 N. 73rd Street
Omaha, NE 68114

OR All Other Nebraska Counties
Department of Health and Human Services
Division of Public Health
Children's Services Licensing
PO Box 94986
Lincoln, NE 68509

Please send all items together to the above address. If any forms are incomplete, the packet will be returned to you. This will result in a delay in the change of Primary Provider.

If you have any questions regarding this process contact:

Douglas or Sarpy County
Gina Ewing
(402) 595-3348

OR

All Other Nebraska Counties
Cindy Strufing
(402) 471-9562; 1-800-600-1289